PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

			101574,466									
		CLAIMS	AS FILED -		(Column 2)			SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
U.S. NATIONAL STAGE FEES							1	RATE	FEE]	RATE	FEE
BASIC FEE			300				1	BASIC FEE		OR	BASIC FEE	300
EXAMINATION FEE			200					EXAM. FEE		1.	EXAM. FEE	200
SEARCH FEE			400					SEARCH FEE		1	SEARCH FEE	400
FEE FOR EXTRA SPEC. PGS.			minus 100 =		/ 50 =			X \$ 125 =			X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			27 minus 20 =		. 7			X \$ 25 =		OR	X \$ 50 =	350
INDEPENDENT CLAIMS			2 m	inus 3 =	*			X \$ 100 =		OR	X \$ 200 =	
<u> </u>		DENT CLAIM PRI					1	+ \$ 180 =		OR	+ \$ 360 =	_
* If the difference in column 1 is less than zero, e					" in co	lumn 2		TOTAL		OR	TOTAL	1250
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							4 - 1	SMALL E	NTITY	OR	OTHER SMALL E	
AMENDMENT A	27	REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 27	Minus	** 27	7	= 0		X \$ 25 =		OR	X \$ 50 =	
	Independent	* 2	Minus	*** 3		= 0		X \$ 100 =		OR	X \$ 200 =	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FFF		OR	TOTAL ADDIT. FFF	
(Column 1) (Column 2) (Column 3)												
NDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
AMENDM	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRES	ENTATION OF M	ULTIPLE DEPE	NDENT C	LAIM			+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FFF		OR	TOTAL ADDIT. FFF	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 02/2005)